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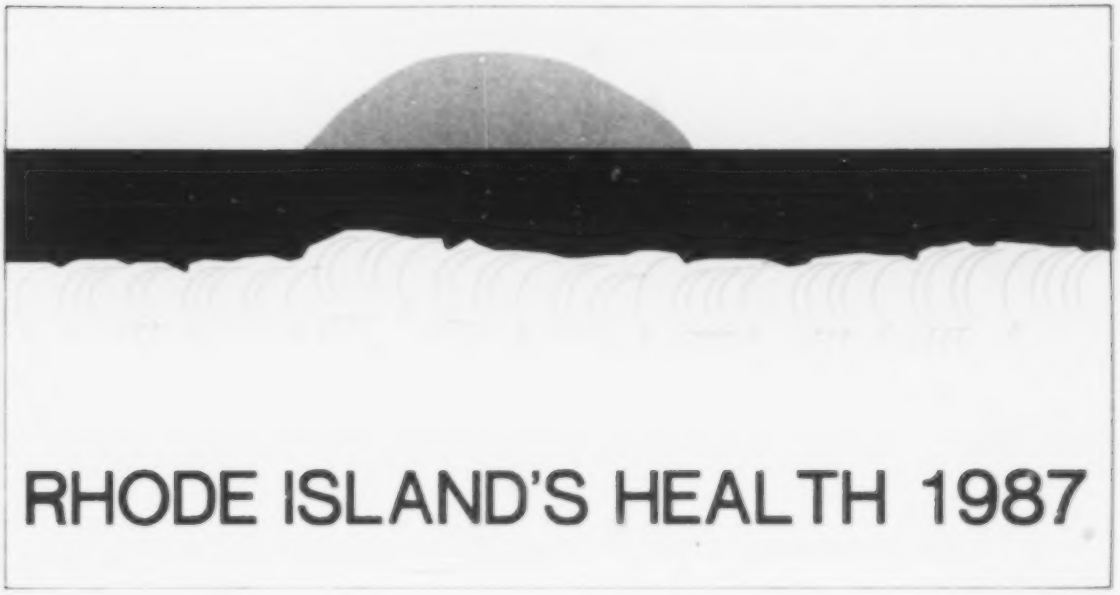

RHODE ISLAND'S HEALTH 1987

Office of Health Statistics

Rhode Island Department of Health

To

The Honorable Edward D. DiPrete, Governor

and

Members of the General Assembly

At this time I respectfully submit to you *Rhode Island's Health*, a report on the health of the people of Rhode Island. This publication is the ninth published under this title and provides a comprehensive description of the condition of the state's health care system and of the health of the state's population. It is designed to help identify strengths and weaknesses in the health status of Rhode Islanders as well as the health care resources available to serve them. The information presented provides the means to set health priorities and to monitor progress in promoting health and improving access to affordable, high-quality health care.

It must be recognized in reviewing the pages to follow that the information contained is the most recent available on a national basis. Although in most cases, there is more recent data available for Rhode Island, the emphasis in this document has been placed on comparing our state to other areas.

Most of the sources used here, both published and unpublished, depend in part on Rhode Island's comprehensive health database for their information. This database has been established over many years by the cooperative efforts of public and private agencies under the leadership of the Department of Health. Continued commitment and support are required to maintain and further enhance the database as new needs arise. Complex health policy issues will continue to receive increasing public attention, and the need for timely, accurate information will expand as well.

We can be proud that Rhode Island has distinguished itself as a leader in health statistics and their application to public health and safety. These strengths rest largely on the sound foundation provided by our unique data system. The Department of Health expresses its appreciation to the many organizations whose efforts support those data capabilities.

H. Denman Scott, M.D., M.P.H.
Director of Health

Acknowledgements

This edition of *Rhode Island's Health* represents a departure from recent editions in that it is designed to serve as a reference document for the health of the state's population and for the operation of the state's health system and to present Rhode Island data along with national data whenever possible. In addition, time trends and other analytical findings that stand out from the data are presented graphically for emphasis and clarity. Dr. Miriam Campbell, consultant to the Office of Health Statistics, was analyst and author of this document, and should be acknowledged for her substantial efforts in implementing this major change of direction.

Thanks are also extended to John Tierney, Deputy Director, and Dr. William Waters, Associate Director for Health Policy, for their leadership and support in the development of this document and for health statistics in general. The comments of others in the Department who reviewed draft versions of *Rhode Island's Health* were most helpful and are gratefully acknowledged. They include Dr. John Fulton, Dr. Robert Marshall, Melinda Komiske, and Dr. William Hollinshead.

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July 1988

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INTRODUCTION

This report, the ninth in the series *Rhode Island's Health*, takes a different focus than did earlier reports, which concentrated on selected topics of current interest. In this publication figures and tables are presented on a wide range of subjects--usually at more than one point in time--from population growth to teenage abortions and the changing cost of hospitalization. Tables provide data for both Rhode Island and the United States as a whole, so that interested readers may compare our progress with that of the nation.

The data shown here were accumulated and derived from a large number of publications and databases, far too many to acknowledge here. Sources are credited below each table as well as in the References. The range of topics was limited primarily by the availability of comparable state and national data.

Rhode Island's Health is the most current contribution to the series providing legislators and other concerned citizens with a quick and easily accessible database on health. The series as a whole serves to clarify aspects of complex health issues, so that interested citizens may help guide the course of public health.

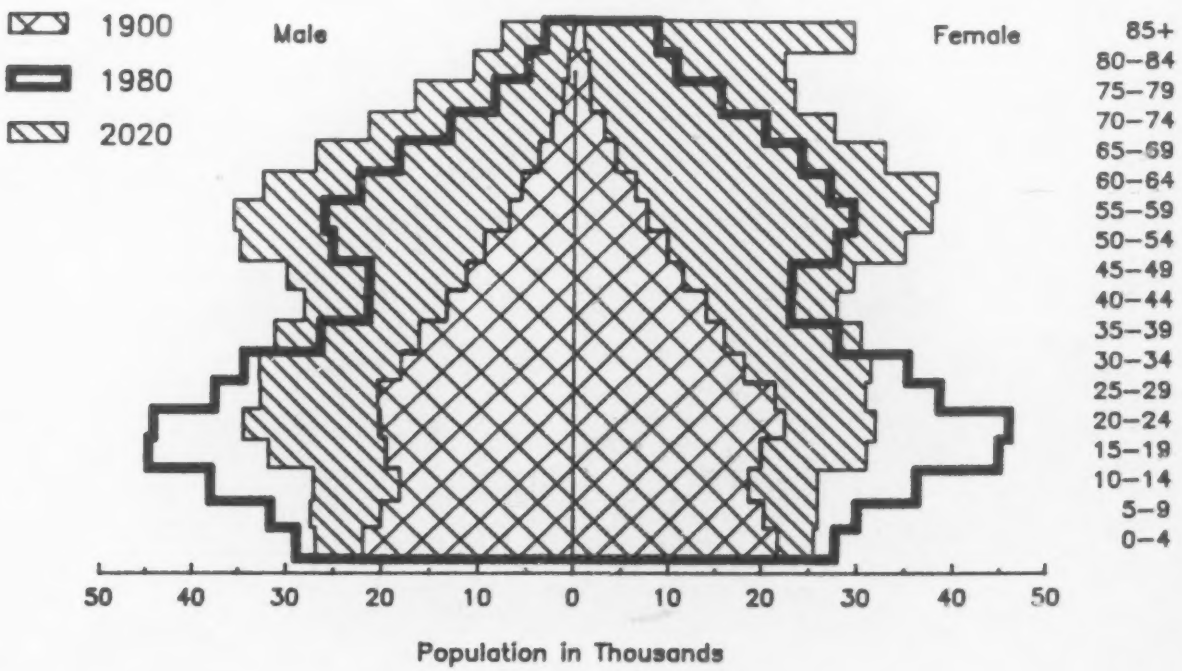
POPULATION SIZE AND DISTRIBUTION

Rhode Island, as the United States, has experienced population growth in the twentieth century. From 1900 to 1985, Rhode Island's population more than doubled. Despite a period of population decline from 1970 to 1980, Rhode Island is growing again; the population is expected to increase by 20,000 from 1985 to 1990 and to exceed one million by the year 2000 (Rhode Island Office of Statewide Planning projections, shown in Table 1).

At the same time, the population distribution is changing. From 1980 to 2020, as seen in Figure 1, the population will continue to age, as "baby boomers" join the ranks of the retired. The large numbers of elderly by 2020 may effect major changes in society, as their numbers overwhelm other age segments in size. Given the continuation of the female advantage in mortality, the elderly majority of 2020 may be composed primarily of women. Use of health services is likely to increase as society ages. And the work force itself may grow older, as businesses compete for a smaller number of younger workers.

FIGURE 1.

Rhode Island Population, 1900, 1980 and 2020 (Projected)



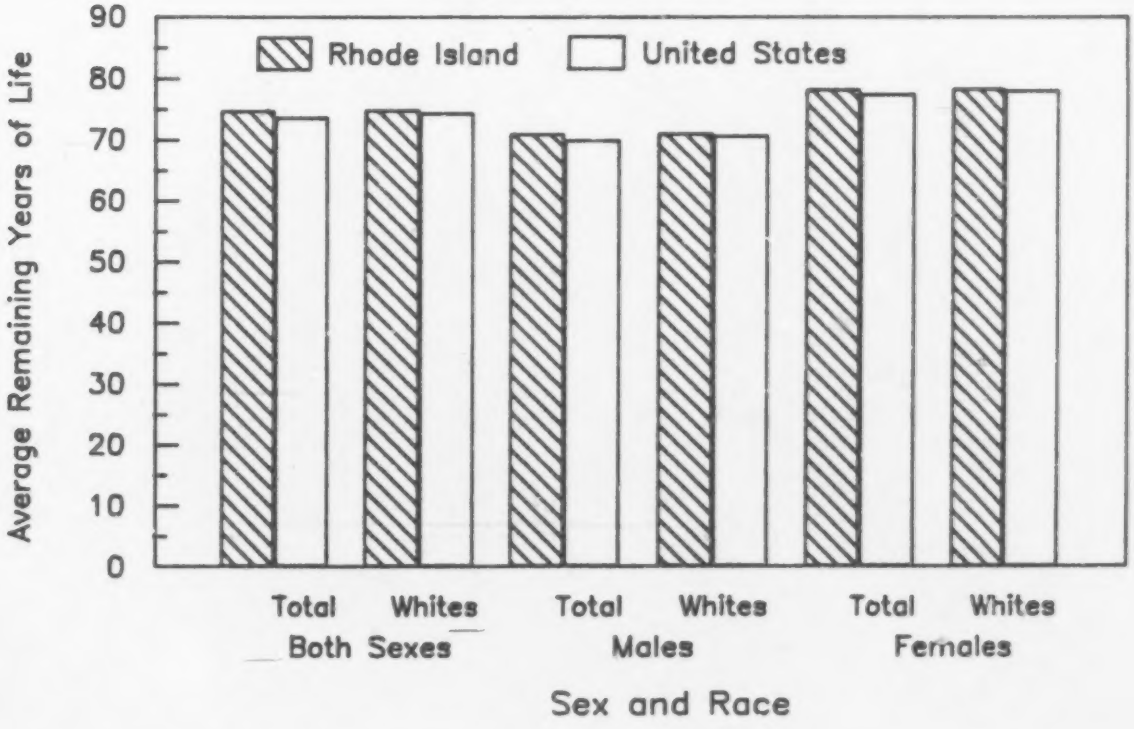
EXPECTATION OF LIFE AT BIRTH

Rhode Islanders can expect to live about one year more on average than the national population, as shown in the contrasting bars for the total population in Figure 2. A large part of this difference can be attributed to the differential survival of nonwhites, who make up a relatively smaller proportion of the Rhode Island population (note for the national data how life expectancy is higher for whites versus the total population). Life table analysis by race had to be limited to the white population due to the small numbers of deaths among blacks and other nonwhites in Rhode Island, which lead to unreliable results for these groups.

Among whites, the Rhode Island advantage in life expectancy at birth is small, less than half a year for both males and females, but statistically reliable.

FIGURE 2.

Expectation of Life at Birth for the Total and the White Populations by Sex, Rhode Island, 1979–1981 and United States, 1980



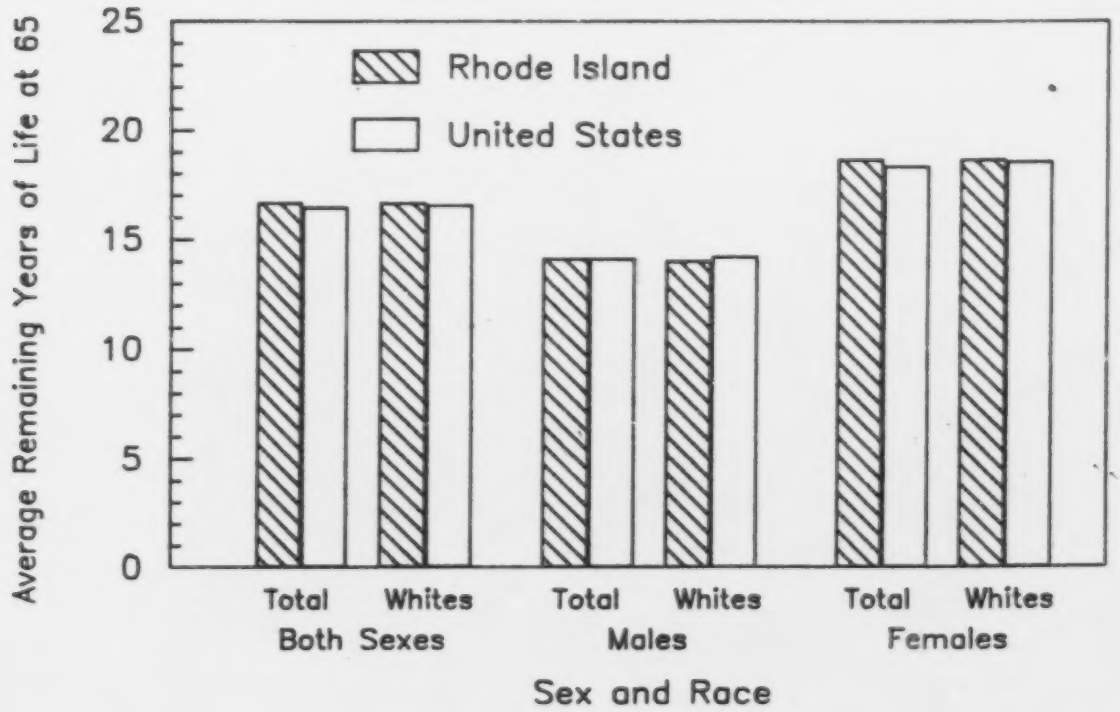
EXPECTATION OF LIFE AT AGE 65

Having survived the mortality risks pertaining to younger ages, Rhode Islanders attaining their 65th birthday can expect to live an additional 16 years on average, to age 79 for males and to age 83 for females. However, by age 65, Rhode Islanders' advantage in life expectancy relative to the nation has diminished or vanished. Unintentional injuries, especially motor vehicle accidents, which disproportionately affect the young and occur at a lower rate in Rhode Island than in the United States as a whole, are less important as causes of mortality among the elderly. On the other hand, causes of death that are important among those over 64 years -- in particular, heart disease and cancer -- occur with a higher frequency in Rhode Island than in the United States.

Among white males at age 65, Rhode Islanders can expect to live about a month or two less than other Americans on average. The Rhode Island advantage among elderly females of approximately three to four months of life diminishes to about two weeks or a month when the experience of whites only is examined.

FIGURE 3.

Expectation of Life at Age 65 for the Total and the White Populations by Sex, Rhode Island, 1979–1981 and United States, 1980



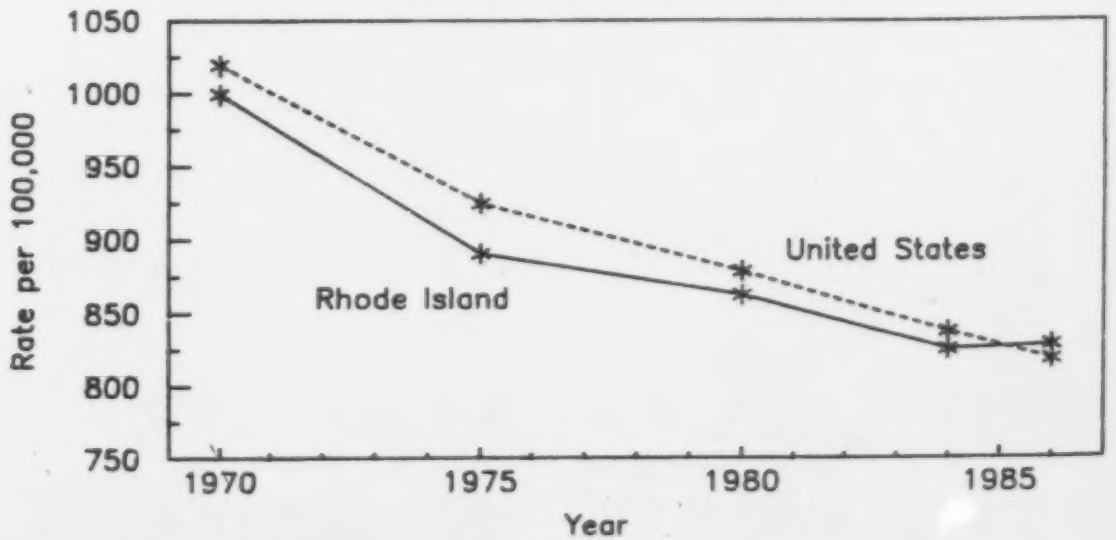
MORTALITY

Crude death rates in Rhode Island, with its older population, are higher than in the United States. In order to compare their death risks, age adjustment is performed. The adjustment procedure attributes the same age structure to each population, so that the death rates in Rhode Island, which has a higher percentage of elderly (who have a higher risk of death), can be compared directly with the death rates of a younger population such as the United States. As shown below, age-adjusted rates have tended to reveal a slightly lower overall mortality risk in Rhode Island.

Between 1970 and 1975 the age-adjusted death rate for Rhode Island fell more steeply than the American rate. Since that time, however, national rates have been declining faster and more steadily, so that by 1986 the adjusted death rate in Rhode Island -- 828 per 100,000 -- was in fact one percent higher than the national mortality rate. Over the entire period 1970 to 1986, age-adjusted mortality in Rhode Island declined 17 percent.

FIGURE 4.

Age-Adjusted Death Rate for Rhode Island and United States, Selected Years



Standard = U.S. Population, 4/1/80

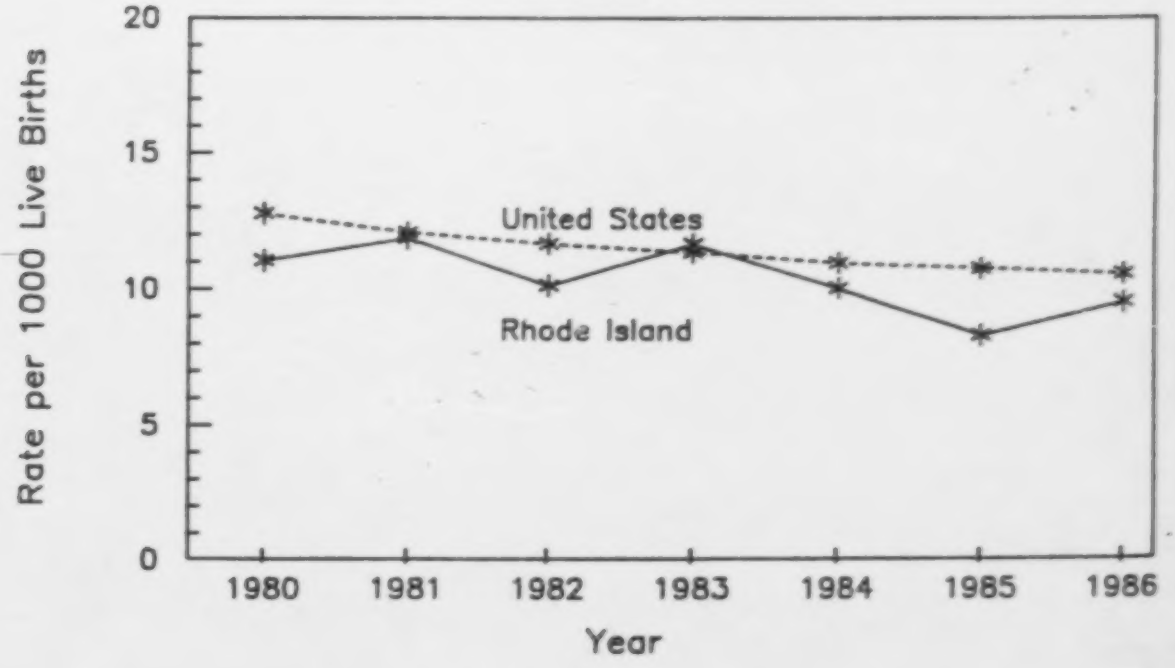
INFANT MORTALITY

The number of infant deaths in Rhode Island is sufficiently low that small changes in the number of infants dying from year to year present dramatic shifts in the level of infant mortality. For example, between 1981 and 1985, Rhode Island witnessed an impressive 30 percent decline in infant mortality, from 11.7 to 8.2 deaths per 1,000 births. The 1985 rate was the lowest ever recorded in Rhode Island. However, the difference in the number of infants dying between these two years was 39 babies, less than one percent of all the infants born in 1985 in Rhode Island.

Due to low numbers, statistically the odds of these rates being not different from each other are very high. Moreover, the 15 percent rise in infant mortality in the subsequent year suggests that the extreme low of 8.2 deaths per 1,000 births in 1985 may have been the serendipitous result of random factors as well as directed efforts to reduce infant mortality.

Nevertheless, the trend of infant mortality in both Rhode Island and in the United States as a whole has been downward. From 1980 to 1986 Rhode Island infant mortality declined 14 percent, closely emulating the national experience.

FIGURE 5.
Infant Death Rate, Rhode Island and United States, 1980–1986

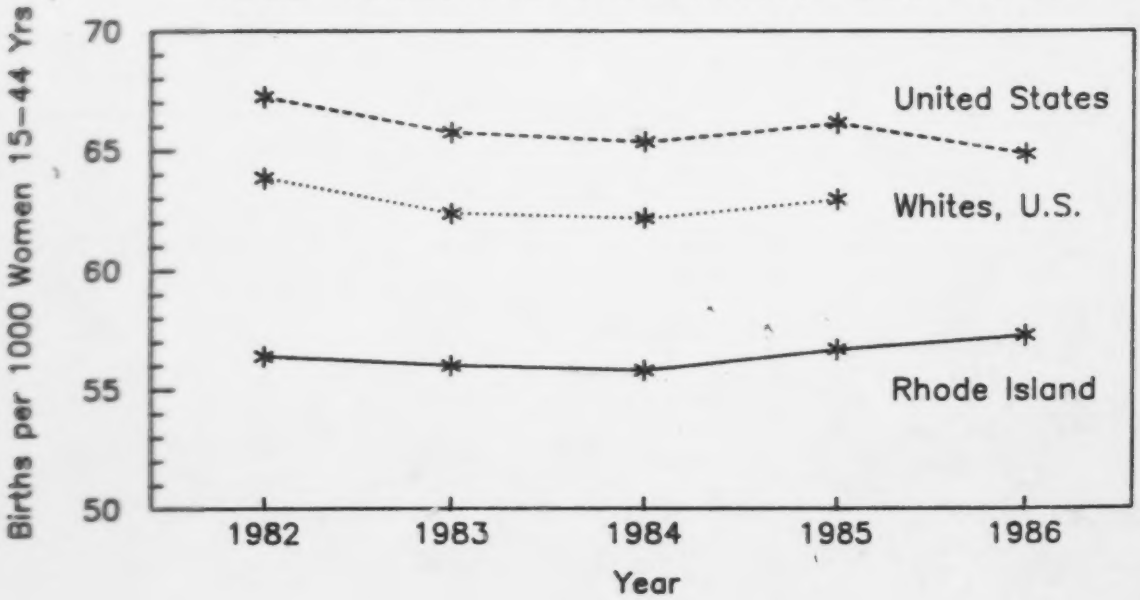


FERTILITY

The rate of births to women of childbearing age (15-44 years) has not varied much between 1982 and 1986. Rhode Islanders maintain a lower fertility rate than does the nation as a whole. This is not purely a function of racial differences in fertility (as a group, black females in the United States have more children per woman than do white females): although whites represent 94 percent of all Rhode Island women of childbearing age, the Rhode Island fertility rate for 1985, for example, was ten percent lower than the national rate among whites (56.7 and 63.0 per 1,000, respectively).

FIGURE 6.

General Fertility Rate, Rhode Island and United States, 1982–1986, and U.S. Whites, 1982–1985



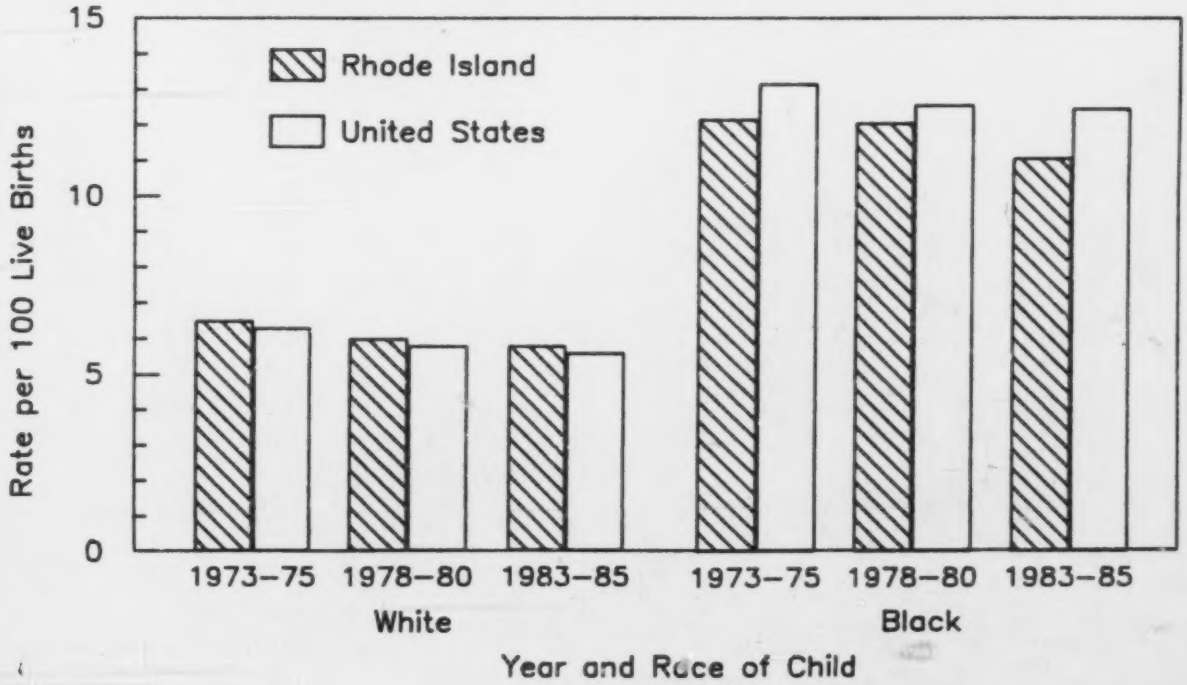
LOW BIRTHWEIGHT BABIES

Babies weighing less than 2500 grams at birth (about five and a half pounds) run higher risks of mortality in the first year of life as well as physical and mental impairments, which may become apparent only in the preschool and school years. Reducing the number of low birthweight infants is feasible through programs providing prenatal counseling and financial support for improved maternal nutrition and healthier life style (in particular, smoke- and alcohol-free pregnancy). The efforts of programs such as the WIC Program, Maternal and Child Health (Title V), and RIte Start may bring about lower percentages of newborns weighing under 2500 grams.

Rhode Island has kept pace with the United States in reducing the number of low birthweight babies. By race and at each point of time, the percentage of newborns of low birthweight in Rhode Island is not statistically different from the percentage among all American babies. Moreover, whereas the gap between black and white rates has risen in the United States since the early 1970s, in Rhode Island progress in reducing the number of low birthweight babies has benefitted Rhode Islanders regardless of race. Nonetheless, the percentage of black infants below 2500 grams at birth has remained nearly twice that of white newborns.

FIGURE 7.

Average Annual Number of Low Birthweight Infants per 100 Live Births by Child's Race, Rhode Island and United States, 1973–1975, 1978–1980, and 1983–1985

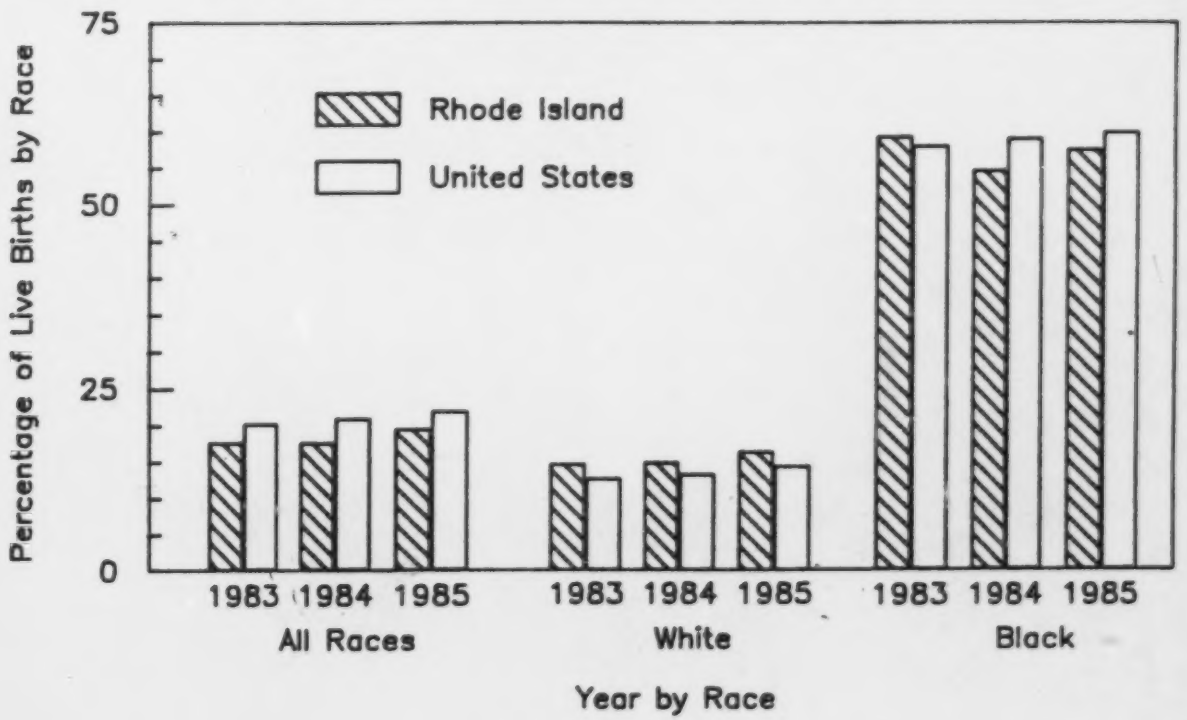


BIRTHS TO UNMARRIED WOMEN

The percentage of all births in which mothers were unmarried has continued to inch along on its upward course in the 1980s in both Rhode Island and the United States as a whole. In 1985, approximately one out of five births in Rhode Island occurred to unmarried women. A birth not legitimated by marriage was 3.5 times more likely among blacks than whites, but among Rhode Island blacks -- unlike other groups in Rhode Island or the United States -- the upward trend in births to unmarried women has not been apparent. For births to whites, on the other hand, there is a significantly higher percentage of unmarried mothers in Rhode Island than in the United States.

FIGURE 8.

Births to Unmarried Women as a Percentage of Live Births by Race, Rhode Island and United States, 1983–1985



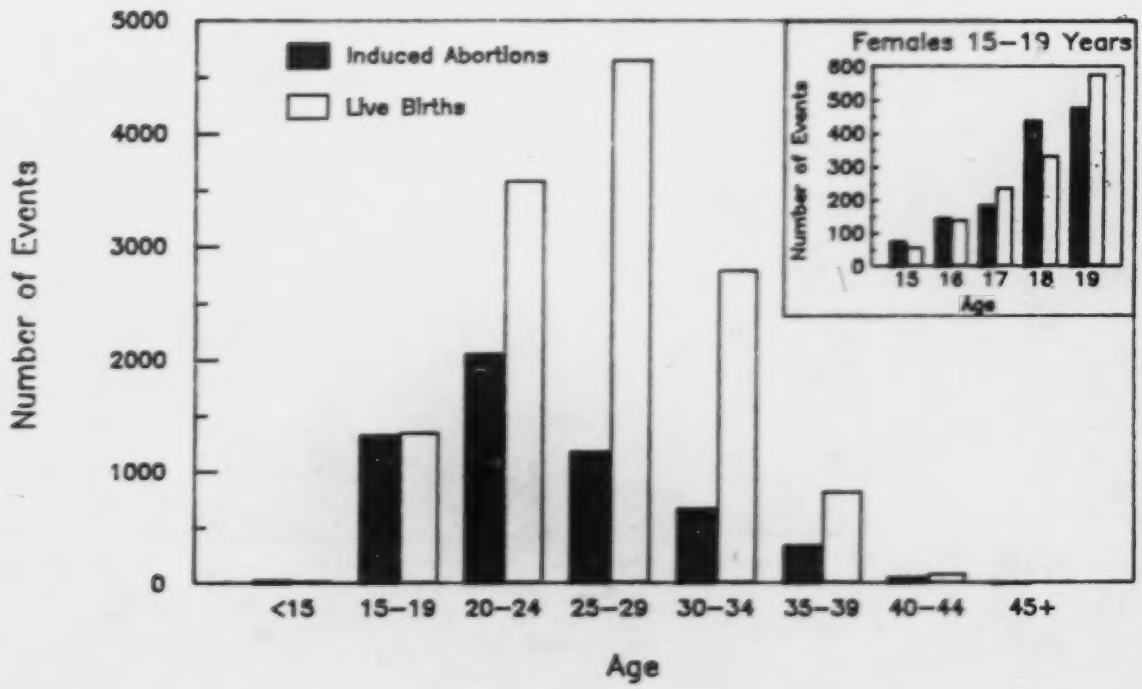
INDUCED ABORTIONS

One measure of the effect of induced abortion on fertility is a comparison of the number of induced abortions performed relative to the number of live births. Among Rhode Island residents in 1986, for every abortion performed, there were 2.3 live births. In the United States in 1983 the estimated figure was comparable.

By age, there is substantial variation, with the highest number of births relative to abortions occurring between the ages of 25 and 34. For example, among women aged 25 to 29, 1,187 abortions were induced, but 4,654 babies were born in 1986 (a ratio of 3.9 births to each abortion). Among those under 20 years or over age 45, the ratio is at or below unity -- one or fewer live births for each abortion. For example, women 45 years or older bore three children but had seven abortions induced. Among the 61 reproductive events that were recorded by the Rhode Island Division of Vital Records for girls under 15 years, ten percent spontaneously aborted, 34 percent produced babies, and 56 percent were ended by induced abortion.

FIGURE 9.

Number of Live Births and Induced Abortions among Rhode Island Females by Age, 1986



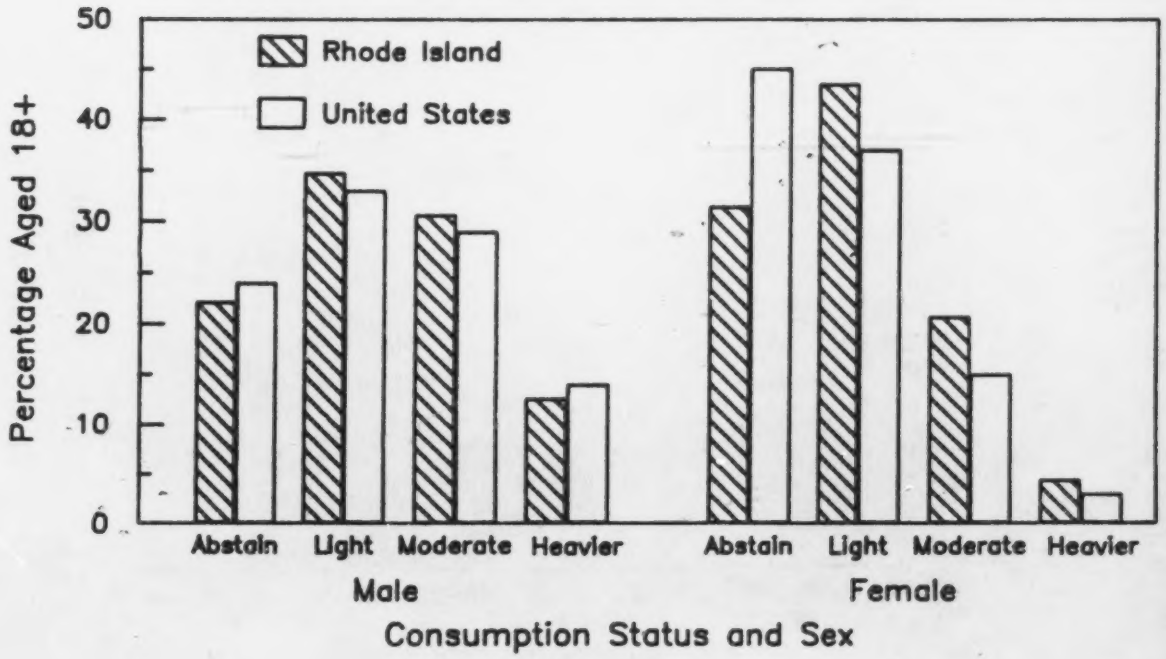
ALCOHOL CONSUMPTION

Male Rhode Islanders aged 18 or above who participated in the 1985 Rhode Island Health Interview Survey reported drinking habits in the two weeks prior to survey similar to those reported by participants in the 1985 National Health Interview Survey. Most are light drinkers, consuming fewer than seven drinks in a two-week period on average. Moderate drinkers, imbibing between six and twenty-seven drinks in two weeks, comprise the next largest group. Abstainers, both former drinkers and those who never drank alcohol, represent less than one quarter of males 18 or older, and heavier drinkers, averaging two or more drinks per day in a two-week period, make up the smallest group. Males drink more heavily than females in both populations.

On the other hand, Rhode Island women tend to drink more on average than women in the United States. In Rhode Island, there is a significantly lower percentage of abstainers, and a lower percentage of females tends to drink lightly. A higher percentage of women in Rhode Island tends to drink moderately or heavily than in the United States as a whole.

FIGURE 10.

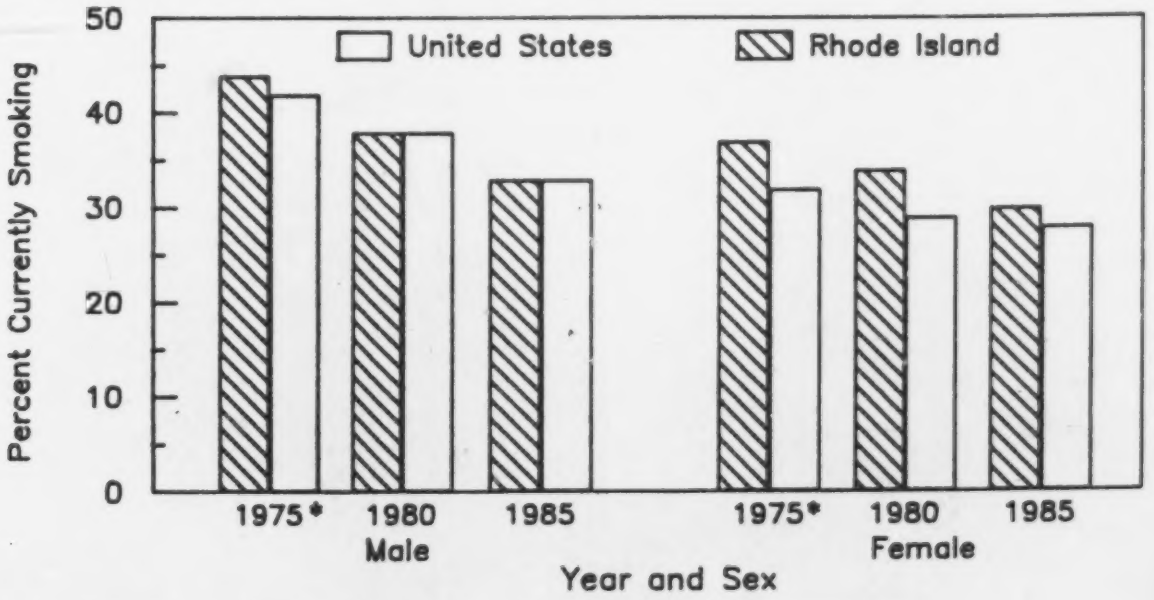
Adult Consumption of Alcohol by Consumption Status, Rhode Island and United States, 1985



CIGARETTE SMOKING

Over time, the percentage of Rhode Island adults 20 years or older who smoke cigarettes has declined to national levels. Although Rhode Island women, in particular, were more likely than other American women to smoke cigarettes in both 1975 (1976 for the United States) and 1980, the most current data show a pronounced decline in smoking among Rhode Island women since 1980, yielding rates of smoking in this group in 1985 comparable to the national rate for women.

FIGURE 11.
Cigarette Smoking among Persons Aged 20 or Older by Sex, Rhode Island and United States, Selected Years

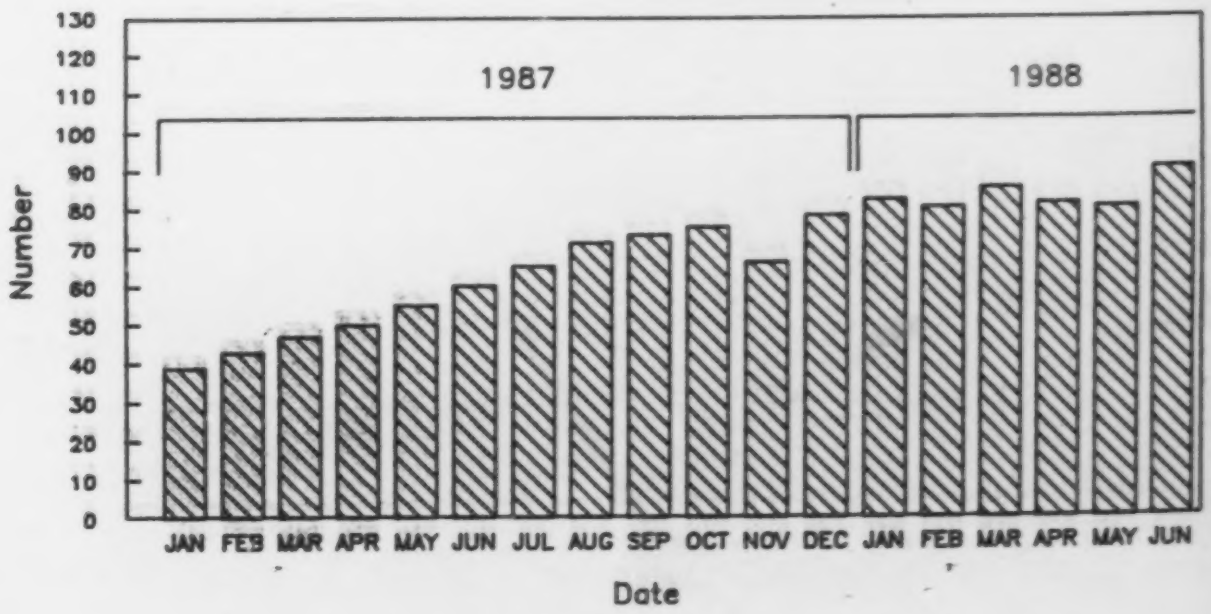


*US data based on 1976 National Health Interview Survey

ACQUIRED IMMUNODEFICIENCY SYNDROME

In Rhode Island, as elsewhere, the number of individuals diagnosed with AIDS has risen since 1981, when the first case was identified. Despite high mortality (49 percent overall in Rhode Island as of June 21, 1988), the number of individuals with AIDS who may require medical care has increased as more persons with HIV antibodies are diagnosed with one or more of the conditions associated with AIDS. The number surviving with AIDS more than doubled between January 1987 and January 1988, from 39 to 82; as of the end of June 1988, there were 91 individuals with AIDS living in Rhode Island.

FIGURE 12.
Number of Surviving AIDS Cases by Month, Rhode Island, January 1987–June 1988

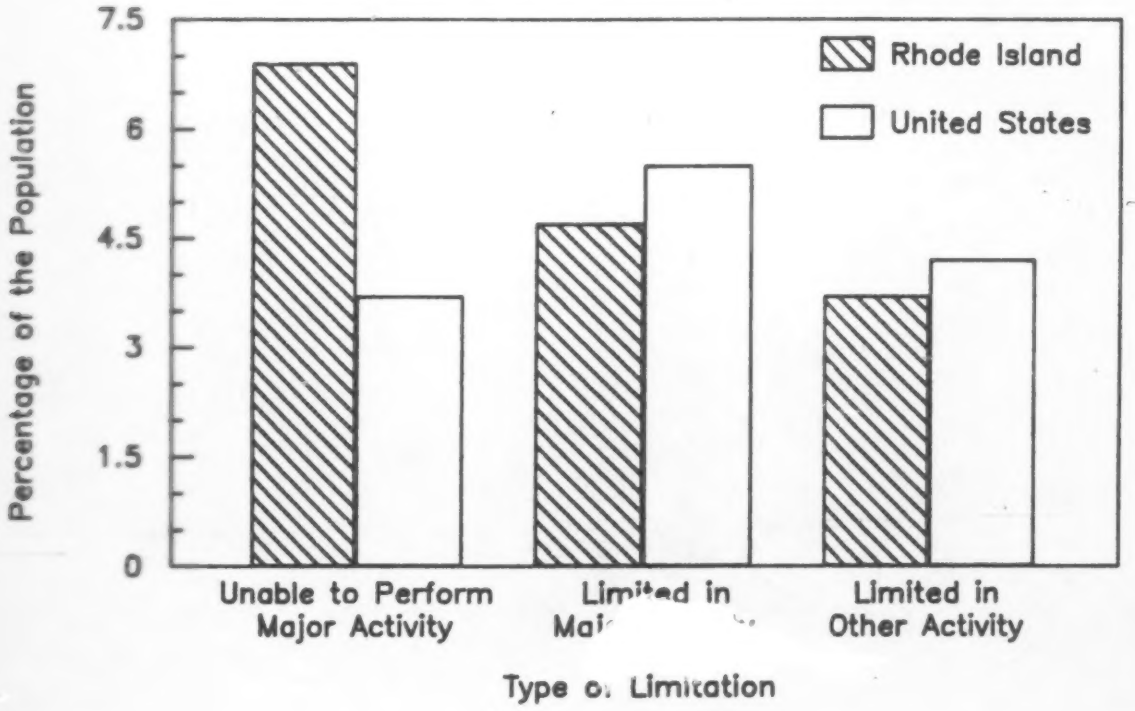


ACTIVITY LIMITATIONS

Rhode Islanders are significantly more likely to report being unable to perform their major activity (for example, work or school) than are Americans in general. When age groups are examined separately as in Table 12, this disability among Rhode Islanders is maintained. Nonetheless, Rhode Islanders are less likely to report being "limited" in their performance of major or any other activities. Among those 65 years or older, a lower percentage of Rhode Islanders identifies any limitation (33 percent versus 40 percent among elderly Americans).

FIGURE 13.

Limitations in Activities of Daily Living, Rhode Island and United States, 1985



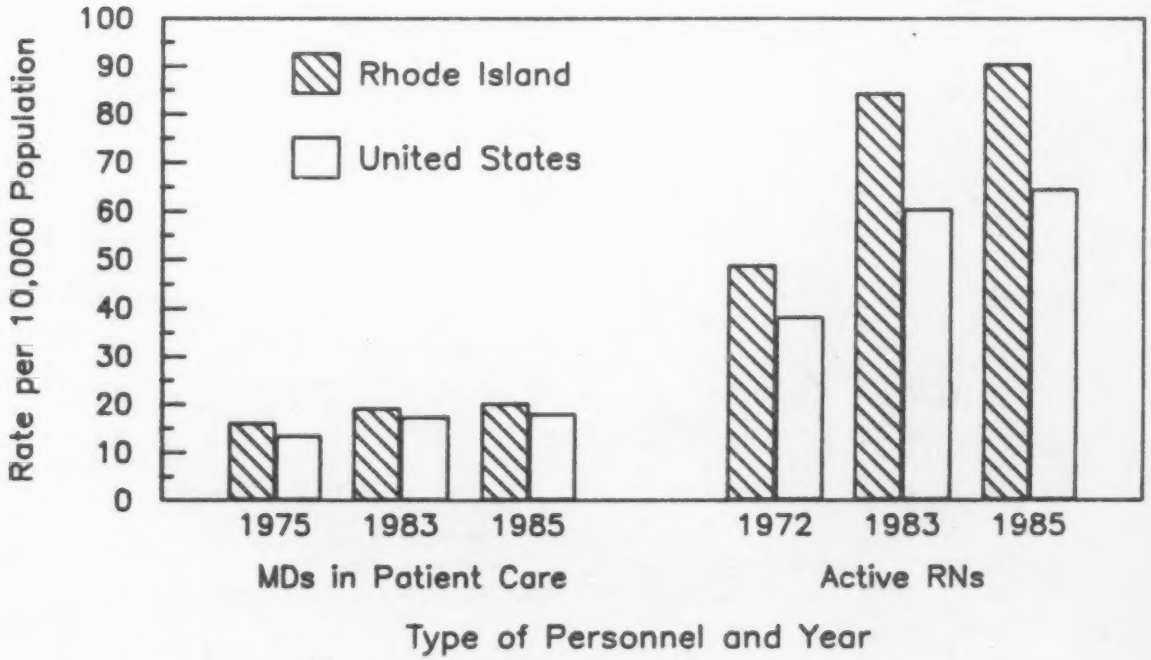
MEDICAL MANPOWER

Among medical personnel, the numbers of nonfederal physicians and active registered nurses per capita have climbed in Rhode Island since the 1970s. The number of physicians per capita grew 31 percent between 1975 and 1985 (medical doctors providing patient care grew 25 percent), and active RNs per capita rose 85 percent between 1972 and 1985.

In particular, the pace of increase in the number of active RNs per person has been noteworthy. In 1972, 206 people in Rhode Island were served by each RN; by 1985, an RN served 111 people on average.

FIGURE 14.

Medical Personnel per Capita in Selected Years, Rhode Island and United States

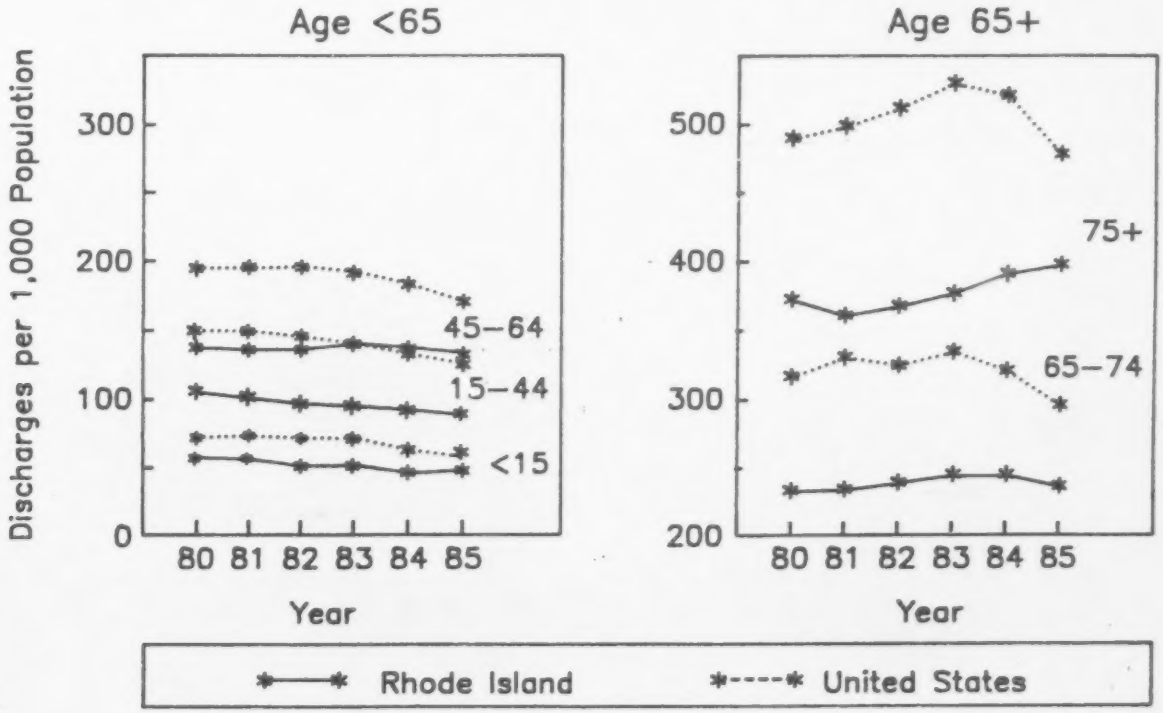


HOSPITAL UTILIZATION

As seen in the figure below and in Table 15 (p. 37), the rate of hospital discharges has been declining in recent years. Utilization in 1985 was lower than in 1980 for all age groups in Rhode Island and the United States with the exception of Rhode Islanders over 64 years of age. For those 65-74 years, hospital use rose by one percent between 1980 and 1985; for Rhode Islanders 75 years or older, who made up nearly 20 percent of all discharges from Rhode Island short-stay hospitals in 1985, the rate increased by seven percent from 372 to 397 per 1,000 population. In all age comparisons for the years 1980 through 1985, however, hospital utilization was lower in Rhode Island than in the United States as a whole.

FIGURE 15.

Discharges per Capita by Age from Nonfederal, Short-Stay Hospitals, Rhode Island and United States, 1980-1985

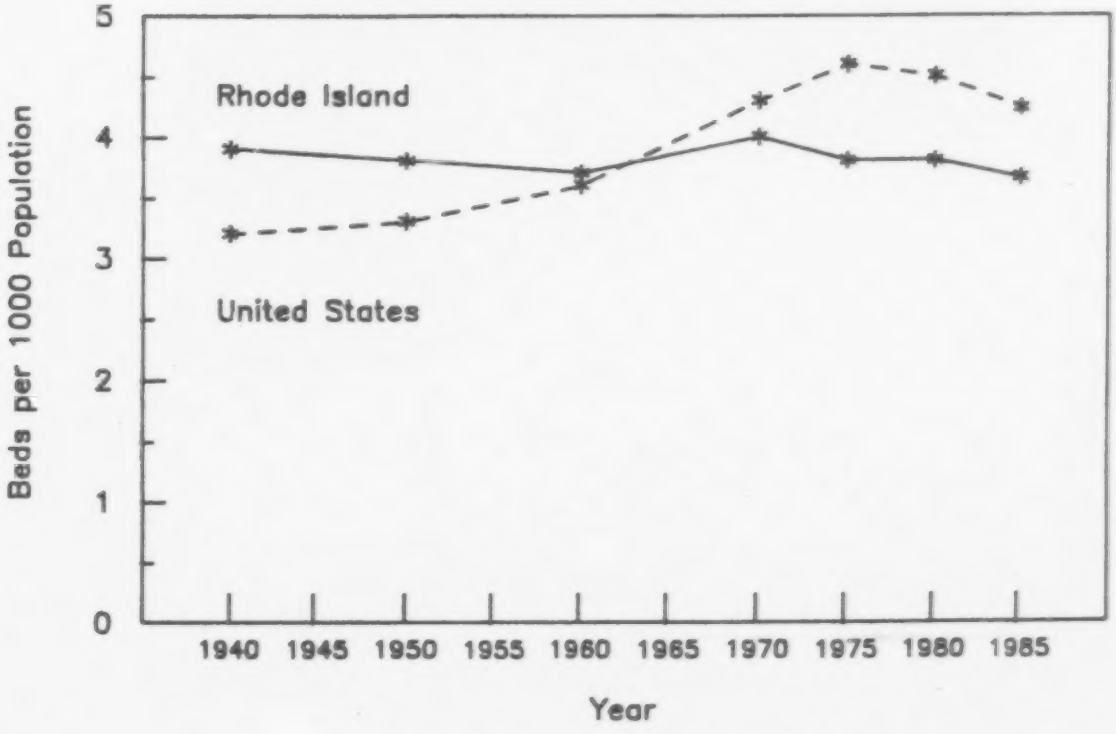


COMMUNITY HOSPITAL BEDS

Expansion in hospital accessibility was mandated in the Hill-Burton Act in the late 1940s. This increase in the number of hospitals (and, consequently, hospital beds) can be seen below in the growth curve for hospital beds per 1,000 population in the United States. In Rhode Island, where the number of hospital beds per 1,000 population was 20 percent higher than the U.S. level in 1940, change has been more gradual, with the greatest increase occurring in the decade 1960-1970. In the 1980s, the trend has been slowly downward.

FIGURE 16.

Community Hospital Beds per Capita, Rhode Island and United States, Selected Years

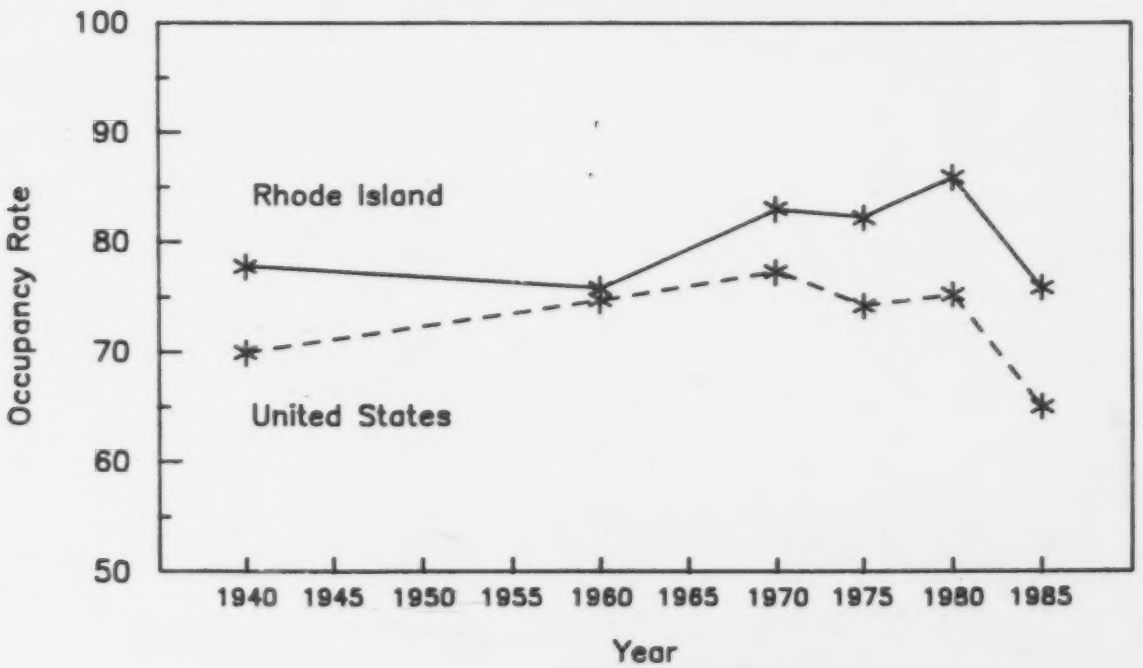


HOSPITAL OCCUPANCY RATE

Occupancy in Rhode Island community hospitals declined 11 percent from 1980 to 1985. For the United States as a whole, occupancy declined 13 percent during this time. A downward trend of similar magnitude was not visible in any of the 40 years beginning in 1940. Prior to 1980, occupancy rates had been uneven but tending to rise. In Rhode Island in 1985 the percentage of beds filled -- 76 percent -- was equivalent to the 1960 level. In the United States the 1985 rate was 7 percent lower than the occupancy rate prevalent in 1940.

FIGURE 17.

Occupancy Rate in Community Hospitals, Rhode Island and United States, Selected Years



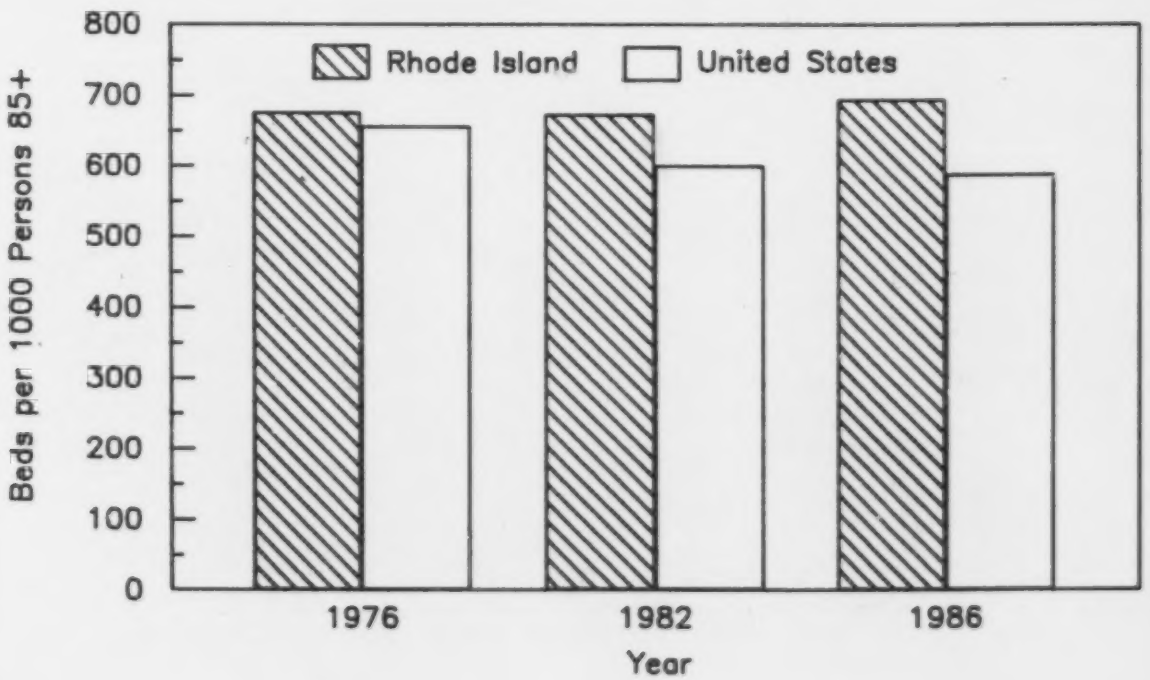
NURSING HOME BEDS

The number of nursing home beds per person 85 years or older in Rhode Island grew three percent between 1976 and 1986. Within just the period 1980 to 1986, however, the population over 84 years increased by approximately 17 percent. It is estimated that there are nursing home beds in Rhode Island for nearly 70 percent of Rhode Island elders 85 years or older.

In the United States, during the same interval, the rate fell 10 percent. Nationally there were nursing home beds for under 60 percent of Americans 84 years and older in 1986.

FIGURE 18.

Nursing Home Beds per Capita among Those Over 84 Years, Rhode Island and United States, 1976, 1982, and 1986



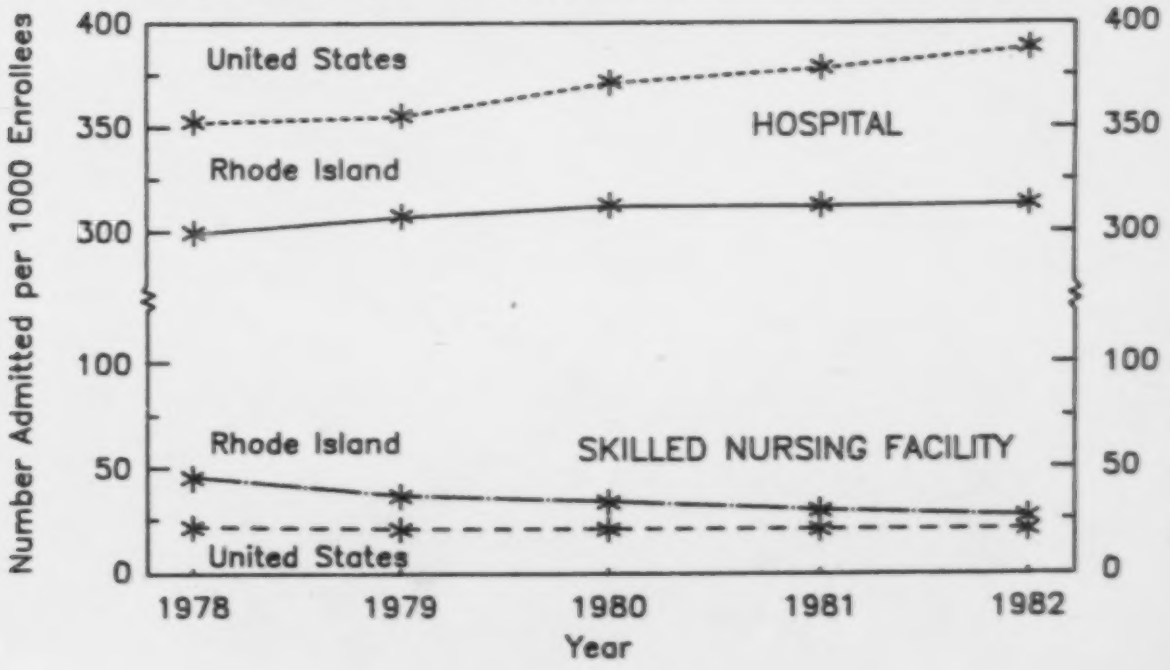
HOSPITAL AND SKILLED NURSING FACILITY ADMISSIONS AMONG ELDERLY MEDICARE ENROLLEES

Hospital admissions among those aged 65 or older who were enrolled in Part A (hospital insurance) of the Medicare program rose between 1978 and 1982. In Rhode Island, the hospital admission rate increased five percent in these four years, that is, over one percent per year, reaching 313 per 1,000 in 1982. Over the four-year period, however, admissions of elderly Medicare enrollees into skilled nursing facilities (SNF) in Rhode Island plummeted 42 percent from 45 per 1,000 in 1978 to 26 per 1,000 in 1982.

In the United States, the hospital admission rate grew at a faster pace from an initially higher rate in 1982. By 1982 the national hospital admission rate was 24 percent higher than the level in Rhode Island. For skilled nursing facility admissions, on the other hand, the decline in Rhode Island admissions was offset by stability in the lower national rate, resulting in similar rates of SNF admissions by 1982.

FIGURE 19.

Hospital Admission Rate and Skilled Nursing Facility Admission Rate among Elderly Medicare Part A Enrollees, Rhode Island and United States, 1978–1982

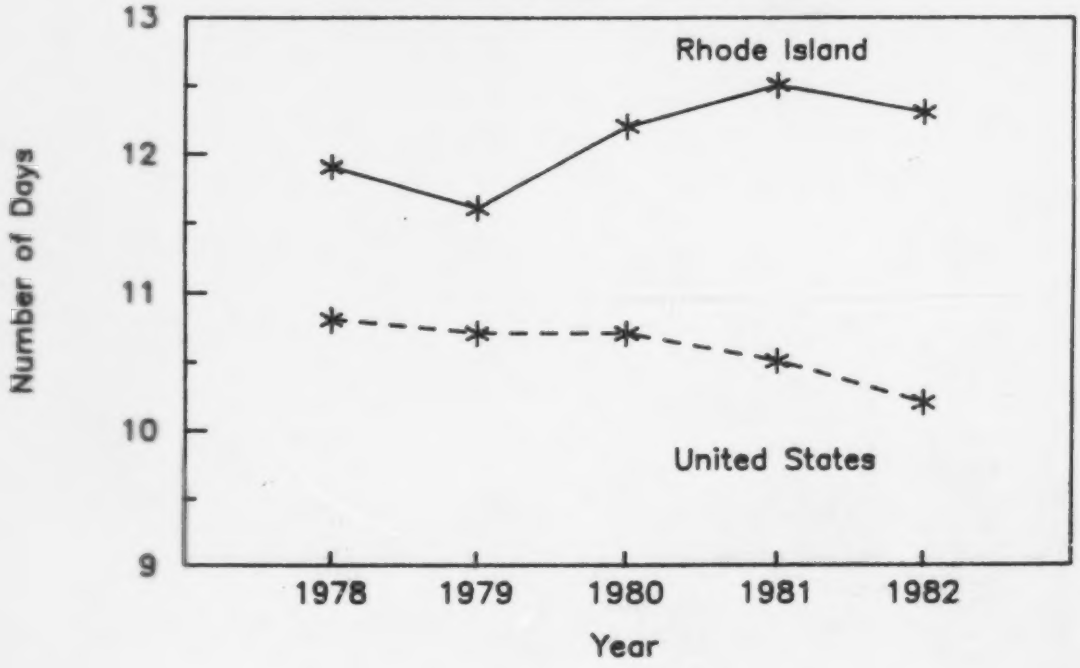


HOSPITAL LENGTH OF STAY AMONG ELDERLY MEDICARE ENROLLEES

In Rhode Island, the average time hospitalized for a person 65 years or older enrolled in Medicare vacillated during the period 1978-82, rising in two years and falling in the other two years. Overall, in Rhode Island the trend has been upward, from 11.9 days in 1978 to 12.3 days in 1982. In the United States during this time, the average length of stay declined from 10.8 to 10.2 days. Thus, in 1982, elderly Rhode Islanders were hospitalized about two days longer on average than were elderly in the United States as a whole. This result may be explained in part by the older average age of Rhode Island elders (9.8 percent of Rhode Islanders 65+ -- but only 9.1 percent of Americans 65+ -- were over age 84 in 1982).

FIGURE 20.

Average Length of Stay in Hospital Under the Medicare Program for Elderly Enrollees, Rhode Island and United States, 1978–1982

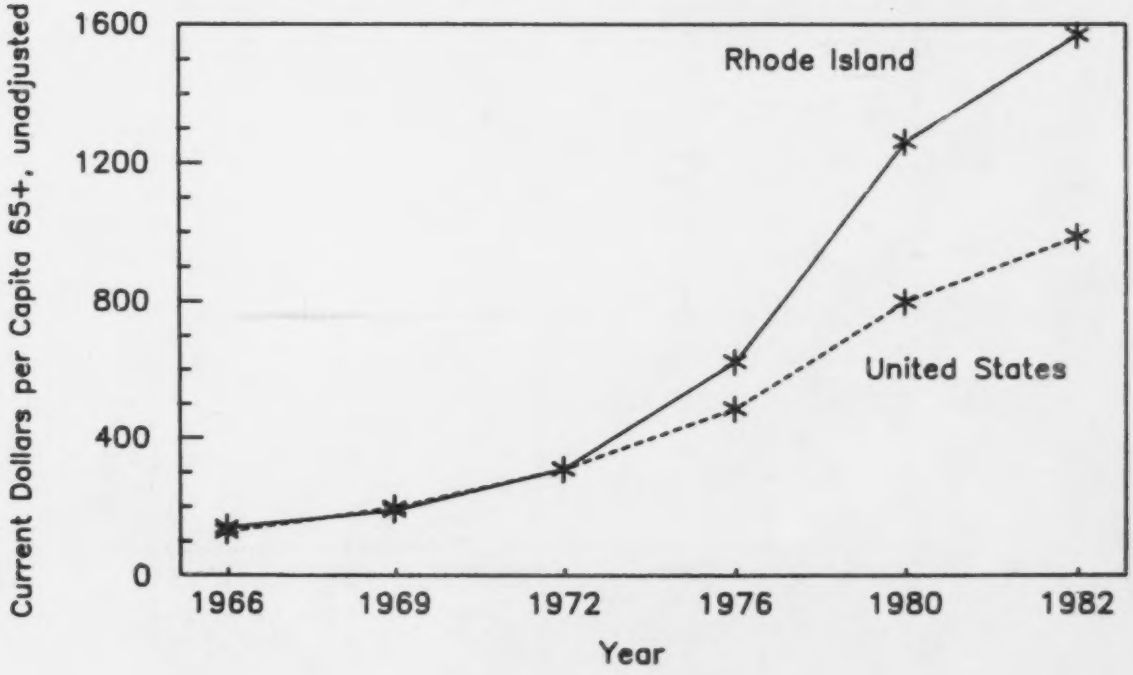


NURSING HOME CARE EXPENDITURES

Hospital costs have not been the only segment of the health care industry to grow in the latter half of the twentieth century. Nursing home care expenditures, a large part of which are paid out-of-pocket, have skyrocketed since the 1960s. On a per capita basis, expenditures for nursing home care for elders 65 years or older in Rhode Island grew over 1,000 percent between 1966 and 1982, from $140 to $1,569.

The Rhode Island experience far outpaced that in the United States as a whole. In 1966, Rhode Island elders paid $13 more per person for nursing home services than Americans did; by 1982 Rhode Island elders paid $583 more per person for nursing home care.

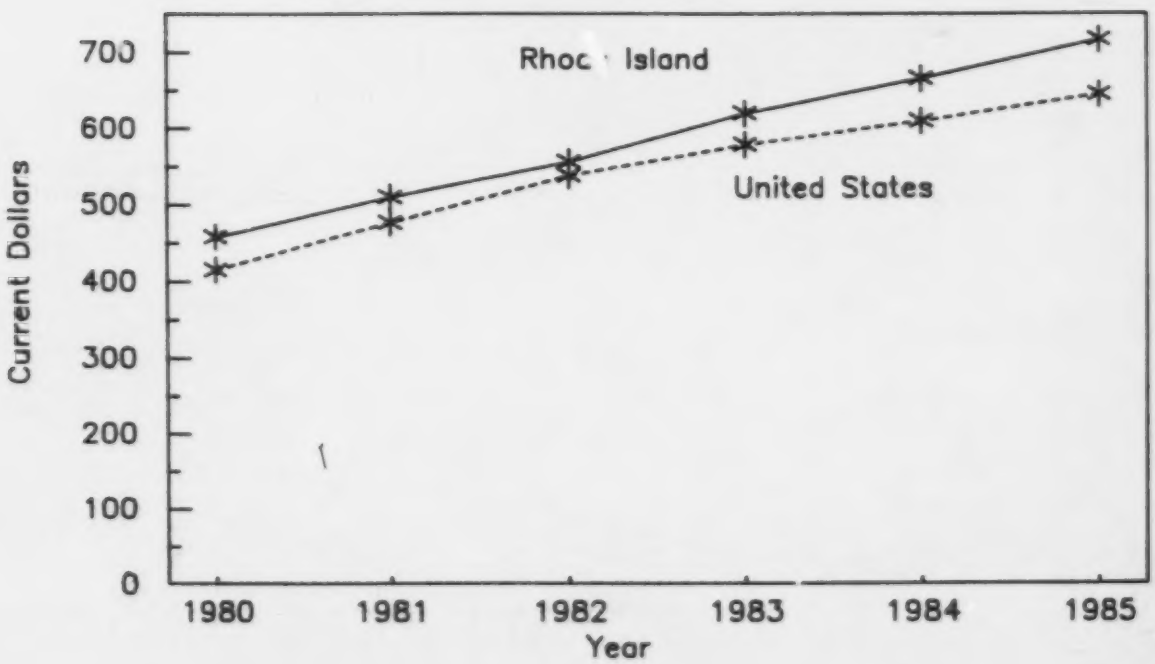
FIGURE 21.
Nursing Home Care Expenditures per Capita 65+, Rhode Island and United States, Selected Years



NONFEDERAL HOSPITAL EXPENDITURES

The burgeoning of hospital costs is clearly portrayed in the figure below. From $457 in 1980, the cost of care per person in a nonfederal hospital rose over 50 percent in Rhode Island by 1985. Rhode Island's experience of rising hospital expenditures closely paralleled the national experience. However, the difference between Rhode Island and American costs grew from $46 in 1980 to $72 in 1985, when hospital costs per person in the Ocean State averaged $716.

FIGURE 22.
Nonfederal Hospital Expenditures per Capita, Rhode Island and United States, 1980–1985



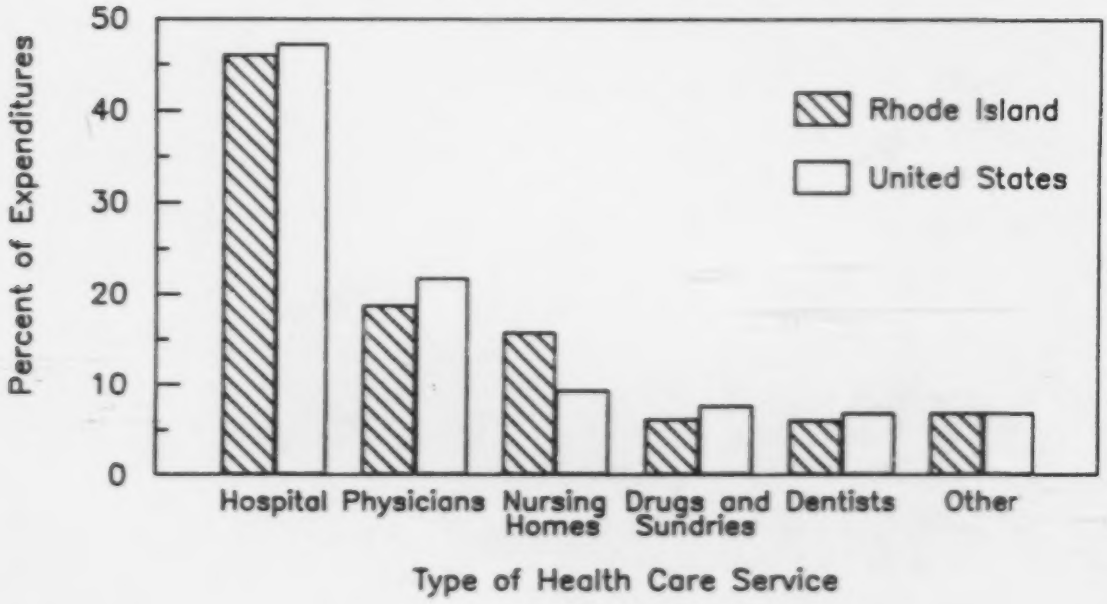
PERSONAL HEALTH CARE EXPENDITURES BY SERVICE

Rhode Islanders differ in some ways from the average American in how they spent their health care dollars in 1982. Personal health care expenditures include all dollars spent by individuals (including payments by third parties) for medical care or health services, including hospitalization, physician and dental visits, outpatient care, diagnostic tests, vaccinations, institutionalization, eyeglasses, pharmaceuticals, crutches, wheelchairs, and so forth.

In Rhode Island, $4.61 of every $10 was spent on hospital care; in the United States, it was $4.73. Yet Rhode Islanders spent 64 cents more per every $10 in health service expenditures in nursing home care, $1.58, versus the 94 cents spent by Americans. And in Rhode Island, less went to physician care, $1.88; in the United States, about $2.18 of every $10 in personal health care expenses paid for physician care.

FIGURE 23.

Percentage Distribution of Personal Health Care Expenditures by Service, Rhode Island and United States, 1982

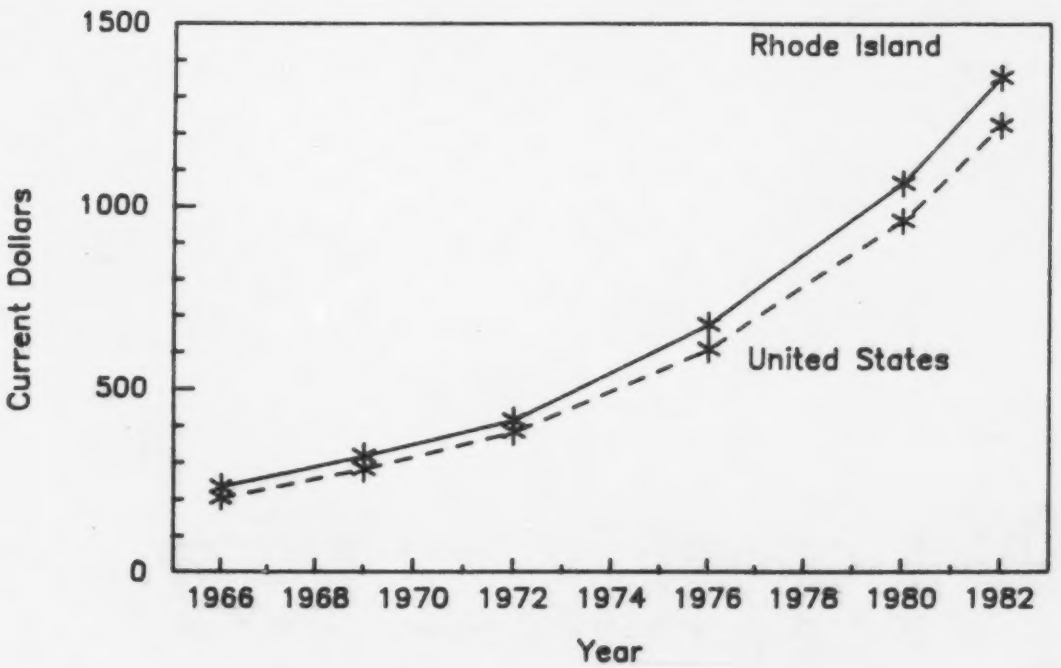


PERSONAL HEALTH CARE EXPENDITURES

Finally, the total growth in personal health care expenditures per capita from 1966 to 1982 is shown below. Percentage change in Rhode Island during this period was 485 percent. In the United States, the growth rate was 507 percent. On the other hand, the numerical increase in Rhode Island, where the population is older on average, was greater: Rhode Island's health expenses grew $1120 in this period; expenditures in the United States grew by $1019. In 1982, Rhode Islanders were spending $131 more per person on health care, $1351, than were Americans in general.

FIGURE 24.

Personal Health Care Expenditures per Capita, Rhode Island and United States, Selected Years



REFERENCES TO THE FIGURES

FIGURE 1: U.S. Bureau of the Census, 1982, *1980 Census of Population*, Vol. 1, Chapter B, Part 41, General population characteristics, Rhode Island; U.S. Bureau of the Census, 1984, Current Population Reports, Series P-25, No. 949, *Estimates of the Population of the United States by Age, Sex, and Race: 1980 to 1983*; Rhode Island Office of Statewide Planning, 1988, Population projections, 1985 to 2020; U.S. Bureau of the Census, 1942, *16th Census of the United States 1940*, Second series, Characteristics of the pouplation Rhode Island; U.S. Bureau of the Census, 1975, *Historical Statistics of the United States, Colonial Times to 1970, Bicentennial Edition, Part 2*; U.S. Bureau of the Census, 1984, Current Population Reports, Series P-25, No. 952, *Projections of the Population of the United States, by Age, Sex, and Race: 1983 to 2080*; Linder, Forrest E. and Robert D. Grove, 1943, *Vital Statistics Rates in the United States 1900-1940*, Washington, D.C.: U.S. Government Printing Office; and Rhode Island Department of Health, Office of Health Statistics, 1987, Estimates of the population 75-79, 80-84 and 85+.

FIGURE 2: National Center for Health Statistics, 1984, *Vital Statistics of the United States, 1980*, Vol. II, Section 6, Life tables; National Center for Health Statistics, 1986, *United States Decennial Life Tables for 1979-1981*, Volume II, State life tables, No. 40 (Rhode Island).

FIGURE 3: National Center for Health Statistics, 1984, *Vital Statistics of the United States, 1980*, Vol. II, Section 6, Life tables; National Center for Health Statistics, 1986, *United States Decennial Life Tables for 1979-1981*, Volume II, State life tables, No. 40 (Rhode Island).

FIGURE 4: National Center for Health Statistics, 1974, 1979, 1985, 1987, *Vital Statistics of the United States*, Vol. II-Mortality, Part A for the years 1970, 1975, 1980, and 1984; Rhode Island Office of Health Statistics, 1988, Age adjustment of crude death rates using 1980 Census of Population; Division of Vital Records, 1988, *Vital Statistics Annual Report 1986*, Rhode Island Department of Health.

FIGURE 5: National Center for Health Statistics, 1987, *Monthly Vital Statistics Report*, 36, 5, Suppl; National Center for Health Statistics, 1987, *Monthly Vital Statistics Report*, 35, 13 (PHS) 87-1120; Division of Vital Records, 1988, *Vital Statistics Annual Report 1986*, Rhode Island Department of Health.

FIGURE 6: National Center for Health Statistics, 1984, 1985, 1986, 1987, *Monthly Vital Statistics Report*, Advance report of final natality statistics..., Vols. 33, 6, Suppl (1982); 34, 6, Suppl (1983); 35, 4, Suppl (1984); 36, 4, Suppl (1985); National Center for Health Statistics, 1987, *Monthly Vital Statistics Report*, 35, 13 (PHS) 87-1120; Division of Vital Records, 1988, *Vital Statistics Annual Report 1986*, Rhode Island Department of Health.

FIGURE 7: National Center for Health Statistics, 1988, *Health United States 1987*, DHHS Pub. No. (PHS) 88-1232.

FIGURE 8: National Center for Health Statistics, 1987, *Monthly Vital Statistics Report*, 36, 5, Suppl.

FIGURE 9: Rhode Island Division of Vital Records, 1988, *Vital Statistics Annual Report 1986*, Rhode Island Department of Health; *Rhode Island Office of Health Statistics, 1987, unpub*lished tabulations.

FIGURE 10: Office of Health Statistics Newsletter, 1986, "Report from the 1985 Health Interview Survey: alcohol use in Rhode Island," Rhode Island Dept. of Health; National Center for Health Statistics, 1986, *Health United States 1986*, DHHS Pub. No. (PHS) 87-1232.

FIGURE 11: Campbell, Miriam K., Margaret C. Reilly and Jay S. Buechner, 1986, *Rhode Island Health Interview Survey 1985 Summary Report*, Rhode Island Dept. of Health; Reilly, Margaret C., Harvey Zimmerman and Catherine Doyle, 1982, *Results of the 1980 Rhode Island Health Interview Survey with Comparisons to 1972 and 1975*, Rhode Island Dept. of Health; National Center for Health Statistics, 1986, *Health United States 1986*, DHHS Pub. No. (PHS) 87-1232.

FIGURE 12: Division of Disease Control, Rhode Island Dept. of Health, 1988.

FIGURE 13: Campbell, Miriam K., Margaret C. Reilly and Jay S. Buechner, 1986, *Rhode Island Health Interview Survey 1985 Summary Report*, Rhode Island Dept. of Health; National Center for Health Statistics, 1986, *Health United States 1986*, DHHS Pub. No. (PHS) 87-1232.

FIGURE 14: U.S. Bureau of the Census, 1975, *Statistical Abstract of the United States 1975*; U.S. Bureau of the Census, 1986, *State and Metropolitan Area Data Book 1986*; National Center for Health Statistics, 1986, *Health United States 1986*, DHHS Pub. No. (PHS) 87-1232; National Center for Health Statistics, 1988, *Health United States 1987*, DHHS Pub. No. (PHS) 88-1232; Donald K. Perry, 1988, "Results of the 1987 sample survey of nurses licensed in Rhode Island: employment patterns and opinions," Rhode Island Department of Health.

FIGURE 15: National Center for Health Statistics, 1988, *Health United States 1987*, DHHS Pub. No. (PHS) 88-1232; Office of Health Statistics, 1988, unpublished data.

FIGURE 16: National Center for Health Statistics, 1988, *Health United States 1987*, DHHS Pub. No. (PHS) 88-1232.

FIGURE 17: National Center for Health Statistics, 1988, *Health United States 1987*, DHHS Pub. No. (PHS) 88-1232.

FIGURE 18: National Center for Health Statistics, 1988, *Health United States 1987*, DHHS Pub. No. (PHS) 88-1232; U.S. Bureau of the Census, 1988, Current Population Reports, Series P-25, No. 1024, *State Population and Household Estimates, With Age, Sex, and Components of Change: 1981-87*.

FIGURE 19: Health Care Financing Administration, 1984, *Medicare Program Statistics Selected State Data, 1978-82*.

FIGURE 20: Health Care Financing Administration, 1984, *Medicare Program Statistics Selected State Data, 1978-82*.

FIGURE 21: National Center for Health Statistics, 1988, *Health United States 1987*, DHHS Pub. No. (PHS) 88-1232; U.S. Bureau of the Census, 1978, Current Population Reports, Series P-25, No. 721, "Estimates of the population of the United States, by age, sex, and race: 1970 to 1977"; U.S. Bureau of the Census, Selected Years, *Statistical Abstract of the United States*.

FIGURE 22: Health Care Financing Administration, 1987, *unpublished data; U.S. Bureau* of the Census, 1988, Current Population Reports, Series P-25, No. 1024, *State Population and Household Estimates, With Age, Sex, and Components of Change: 1981-87*.

FIGURE 23: U.S. Bureau of the Census, 1986, *State and Metropolitan Area Data Book 1986*.

FIGURE 24: National Center for Health Statistics, 1986, *Health United States 1986*, DHHS Pub. No. (PHS) 87-1232.

DETAILED TABLES

TABLE 1. Population Size in Selected Years, Rhode Island and United States

Year	Population in Thousands	
	Rhode Island	United States
1990 (Projected)	988	249,203
7/1/85	968	238,740
7/1/84	962	236,495
7/1/83	956	234,284
4/1/80	947	226,546
4/1/70	950	203,302
4/1/60	859	179,323

SOURCE: U.S. Bureau of the Census, 1986, *State and Metropolitan Area Data Book 1986*.

TABLE 2. Expectation of Life at Birth and at Age 65 by Race, Rhode Island, 1979-1981 and United States, 1980

Population Group	Rhode Island		United States	
	e_0	e_{65}	e_0	e_{65}
All Races	74.8	16.6	73.7	16.4
All Males	71.0	14.1	70.0	14.1
All Females	78.3	18.6	77.5	18.3
Whites	74.9	16.6	74.4	16.5
White Males	71.1	14.0	70.7	14.2
White Females	78.4	18.6	78.1	18.5
Blacks	*	*	68.0	14.8
Black Males	*	*	63.7	12.9
Black Females	*	*	72.3	16.5

*Figures unreliable due to small number of deaths

SOURCE: NCHS, 1984, *Vital Statistics of the United States, 1980*, Volume II, Section 6, "Life Tables" and NCHS, 1986, *United States Decennial Life Tables for 1979-1981*, Volume II, "State life tables", No. 40 (Rhode Island).

TABLE 3. Age-Adjusted* Death Rate per 100,000 for Rhode Island and United States, Selected Years

	1970	1975	1980	1984	1986
Rhode Island	998.7	890.3	861.6	824.5	828.0
United States	1019.4	924.4	878.1	937.4	817.5

*The United States population count of April 1, 1980 was used as the standard population in the adjustment procedure.

SOURCES: NCHS, *Vital Statistics of the United States*, "Volume II-Mortality, Part A", for 1970, 1975, 1980 and 1984; Div. of Vital Records, 1988, *Vital Statistics Annual Report 1986*, RIDH.

TABLE 4. Infant Death Rate per 1,000 Live Births, Rhode Island and United States, 1980-1986

	1980	1981	1982	1983	1984	1985	1986
Rhode Island	10.9	11.7	10.0	11.5	9.9	8.2	9.4
United States	12.6	11.9	11.5	11.2	10.8	10.6	10.4

SOURCE: NCHS, 1987, *Monthly Vital Statistics Report* 36, 5, Suppl.; NCHS, 1987, *Monthly Vital Statistics Report*, 35,13 (PHS) 87-1120; Div. of Vital Records, 1988, *Vital Statistics Annual Report 1986*, RIDH.

TABLE 5. General Fertility Rate, Rhode Island and United States, 1982-1986, and Whites in the United States, 1982-1985

	Births per 1,000 Women 15-44 Years				
Place	1982	1983	1984	1985	1986
Rhode Island	56.4	56.0	55.8	56.7	57.3
United States	67.3	65.8	65.4	66.2	64.9
U.S. Whites	63.9	62.4	62.2	63.0	N.A.

SOURCES: NCHS, Selected Years, *Monthly Vital Statistics Report*, Advance report of final natality statistics..., Vols. 33, 6, Suppl (1982); 34, 6, Suppl (1983); 35, 4, Suppl (1984); 36, 4, Suppl (1985); NCHS, 1987, *Monthly Vital Statistics Report* 35,13 (PHS) 87-1120; Div. of Vital Records, 1988, *Vital Statistics Annual Report 1986*, RIDH.

TABLE 6. Average Annual Number of Low Birthweight Infants (Weighing Under 2500 Grams at Birth) per 100 Live Births According to the Race of the Child, Rhode Island and United States, 1973-1975, 1978-1980, 1983-1985

	Rhode Island			United States		
Year	Total	White	Black	Total	White	Black
1983-1985	6.3	5.8	11.1	6.8	5.6	12.5
1978-1980*	6.4	6.0	12.1	7.0	5.8	12.6
1973-1975*	6.8	6.5	12.2	7.5	6.3	13.2

*Before 1979, data include infants weighing 2500 grams at birth.

SOURCE: NCHS, 1988, *Health United States 1987*, DHHS Pub. No. (PHS) 88-1232.

TABLE 7. Births to Unmarried Women as a Percentage of Live Births by Race, Rhode Island and United States, 1983-1985

	Percentage of Births Occurring to Unmarried Women					
	Rhode Island			United States		
Year	White	Black	Total	White	Black	Total
1983	14.8	59.5	17.7	12.8	58.2	20.3
1984	15.0	54.8	17.7	13.4	59.2	21.0
1985	16.5	57.7	19.6	14.5	60.1	22.0

SOURCE: NCHS, 1987, *Monthly Vital Statistics Report* 36, 5, Suppl.

TABLE 8. Number of Live Births, Induced Abortions and Spontaneous Abortions Reported among Rhode Island Females by Age, 1986

Age	Live Births	Induced Abortions	Spontaneous Abortions	Total
Under 15	21	34	6	61
15	59	79	3	141
16	142	149	5	296
17	239	187	10	436
18	335	442	18	795
19	579	480	25	1,084
20-24	3,588	2,061	145	5,794
25-29	4,654	1,187	228	6,069
30-34	2,793	677	193	3,663
35-39	823	349	82	1,254
40-44	86	63	11	160
45+	3	7	0	10
Total	13,322	5,715	726	19,763

SOURCES: Rhode Island Div. of Vital Records, 1988, *Vital Statistics Annual Report 1986*, Rhode Island Department of Health; *Rhode Island Office of Health Statistics, 1987*, unpublished tabulations.

TABLE 9. Alcohol Consumption Status, Rhode Island and United States, 1985

Alcohol Consumption Status*	Male		Female	
	Rhode Island	United States	Rhode Island	United States
Abstain	22.1%	24%	31.4%	45%
Light	34.7	33	43.5	37
Moderate	30.6	29	20.7	15
Heavier	12.6	14	4.4	3
Total	100.0	100	100.0	100

*Alcohol consumption is defined in average ounces of alcohol per day over the past two weeks: abstain, 0; light, .01-.21; moderate, .22-.99; and heavier, 1.00 or more.

SOURCES: Rhode Island Dept. of Health, 1986, "Report from the 1985 Health Interview Survey: Alcohol Use in Rhode Island" and NCHS, 1986, *Health United States 1986*, DHHS Pub. No. (PHS) 87-1232.

TABLE 10. Percentage Smoking Cigarettes among Persons 20 Years or Older by Sex, 1975, 1980 and 1985 and by Age and Sex, 1985, Rhode Island and United States

	Total by Year			by Age in 1985				
Sex and Place	1975	1980	1985	20-24	25-34	35-44	45-64	65+
Males								
Rhode Island	44	38	33	31.7	36.7	40.8	30.3	20.6
United States	42	38	33	31.0	38.2	37.6	33.4	19.6
Females								
Rhode Island	37	34	30	32.6	32.5	32.7	35.2	16.4
United States	32	29	28	32.1	32.0	31.5	29.9	13.5

SOURCES: Campbell, M.K., M.C. Reilly, and J.S. Buechner, 1986, *Rhode Island Health Interview Survey 1985 Summary Report*, Rhode Island Dept. of Health; NCHS, 1986, *Health United States 1986*, DHHS Pub. No. (PHS) 87-1232.

TABLE 11. Cumulated Cases, Cumulated Deaths, and Current Surviving Cases of Acquired Immunodeficiency Syndrome in Rhode Island by Month, December 1986 through June 1988

Date	Total Cases	Total Deaths	Surviving Cases
Dec 1986	66	32	34
Jan 1987	72	33	39
Feb 1987	78	35	43
Mar 1987	84	37	47
Apr 1987	87	39	48
May 1987	95	40	55
Jun 1987	100	40	60
Jul 1987	107	42	65
Aug 1987	113	42	71
Sep 1987	116	43	73
Oct 1987	122	47	75
Nov 1987	127	61	66
Dec 1987	144	66	78
Jan 1988	148	66	82
Feb 1988	150	70	80
Mar 1988	159	74	85
Apr 1988	162	81	81
May 1988	167	87	80
Jun 1988	178	87	91

SOURCE: Div. of Disease Control, Rhode Island Dept. of Health.

TABLE 12. Percentage of the Total Population, the Population Aged 45-64, and the Population Aged 65 or Older with Limitations in Activities of Daily Living, Rhode Island and United States, 1985

State and Age Group	Unable to Carry on Major Activity	Limited in Amount or Kind of Major Activity	Limited but Not in Major Activity
Rhode Island			
45-64	11.9	7.5	3.6
65+	19.3	3.1	10.7
Total	6.9	4.7	3.7
United States			
45-64	8.7	8.8	5.9
65+	10.4	13.8	15.5
Total	3.7	5.5	4.2

SOURCES: Rhode Island: M.K. Campbell, M.C. Reilly, and J.S. Buechner, 1986, *Rhode Island Health Interview Survey 1985 Survey Report*, Rhode Island Dept. of Health; United States: NCHS, 1986, *Health United States 1986*, DHHS Pub No. (PHS) 87-1232.

TABLE 13. Nonfederal Physicians per 10,000 Population, Rhode Island and United States, 1975, 1983, and 1985

	All Physicians			Doctors of Medicine					
				Patient Care			Primary Care*		
	1985	1983	1975	1985	1983	1975	1985	1983	1975
Rhode Island	23.3	22.0	17.8	20.2	19.2	16.1	5.5	4.8	4.4
United States	20.7	19.9	15.3	18.0	17.4	13.5	5.4	5.1	4.1

*Specializing in General Practice, Family Practice, Internal Medicine, or Pediatrics

SOURCE: NCHS, 1986, *Health United States 1986*, DHHS Pub. No. (PHS) 87-1232 and NCHS, 1988, *Health United States 1987*, DHHS Pub. No. (PHS) 88-1232.

TABLE 14. The Number of Active Registered Nurses per 10,000 Population, Rhode Island and United States, 1972, 1983, and 1985

	1985	1983	1972
Rhode Island	89.9	83.8	48.5
United States	64.1	60.0	38.0

SOURCE: U.S. Bureau of the Census, 1986, *State and Metropolitan Area Data Book 1986* and U.S. Bureau of the Census, 1975, *Statistical Abstract of the United States 1975*; NCHS, 1988, *Health United States 1987*, DHHS Pub. No. (PHS) 88-1232; Donald K. Perry, 1988, "Results of the 1987 sample survey of nurses licensed in Rhode Island: employment patterns and opinions, RIDH.

TABLE 15. Discharges* per 1,000 Population by Age from Nonfederal, Short-Stay Hospitals in Rhode Island and United States, 1980-1986

Place	Age	1980	1981	1982	1983	1984	1985	1986
RI	<15	56.3	55.3	50.4	51.3	45.1	47.7	--
	15-44	104.8	100.1	96.2	94.2	91.2	87.6	--
	45-64	136.9	135.1	136.2	140.0	136.8	132.9	--
	65-74	232.9	233.8	238.9	244.8	244.6	235.9	--
	75+	371.9	360.1	367.1	376.3	390.4	396.8	--
US	<15	71.6	72.9	71.2	70.8	62.0	57.2	53.5
	15-44	150.2	148.7	145.0	140.3	132.2	125.1	118.9
	45-64	194.8	195.3	195.5	192.2	183.3	169.5	162.2
	65-74	315.9	330.0	324.2	334.2	319.6	294.9	296.8
	75+	489.1	498.4	511.4	529.3	520.1	476.5	470.5

*excludes newborns

SOURCE: NCHS, 1988, *Health United States 1987*, DHHS Pub. No. (PHS) 88-1232; Office of Health Statistics, 1988, unpublished data.

TABLE 16. Community Hospital Beds per 1,000 Population, Rhode Island and United States, Selected Years

	1985	1980	1975	1970	1960	1950	1940
Rhode Island	3.6	3.8	3.8	4.0	3.7	3.8	3.9
United States	4.2	4.5	4.6	4.3	3.6	3.3	3.2

SOURCE: NCHS, 1988, *Health United States 1987*, DHHS Pub. No. (PHS) 88-1232.

TABLE 17. Occupancy Rate in Community Hospitals, Rhode Island and United States, Selected Years

	1985	1980	1975	1970	1960	1940
Rhode Island	76.2	85.9	82.2	82.9	75.7	77.7
United States	65.1	75.2	74.2	77.3	74.7	69.9

SOURCE: NCHS, 1988, *Health United States 1987*, DHHS Pub. No. (PHS) 88-1232.

TABLE 18. Nursing Home Statistics, Rhode Island and United States, 1976, 1982 and 1986

	Number of Beds per Facility in Facilities with 25+ Beds			Beds per 1,000 Persons 85+ Years		
	1986	1982	1976	1986	1982	1976
Rhode Island	98.3	93.5	79.6	694.0	673.0	676.3
United States	100.9	100.9	91.4	587.7	600.0	656.1

SOURCE: NCHS, 1988, *Health United States 1987*, DHHS Pub. No. (PHS) 88-1232; U.S. Bureau of the Census, Current Population Reports, Series P-25, No. 1024, *State Population and Household Estimates, With Age, Sex, and Components of Change: 1981-87*; U.S. Bureau of the Census, selected years, *Statistical Abstract of the United States*; Office of Health Statistics, 1988, unpublished population estimates.

TABLE 19. Nursing Home Care Expenditures per Capita 65+, Rhode Island and United States, Selected Years

	1982	1980	1976	1972	1969	1966
Rhode Island	$1,569	$1,260	$623	$310	$189	$140
United States	986	798	486	309	197	127

SOURCE: NCHS, 1988, *Health United States 1987*, DHHS Pub. No. (PHS) 88-1232; U.S. Bureau of the Census, 1978, Current Population Reports, Series P-25, No. 721, "Estimates of the population of the United States, by age, sex, and race: 1970 to 1977"; U.S. Bureau of the Census, selected years, *Statistical Abstract of the United States*.

TABLE 20. Medicare Program Statistics for Aged Part A (Hospital Insurance) Enrollees in Selected Years, Rhode Island and United States

	Average Benefit Payment	Admission Rate per 1,000 Enrolled		Average Covered Charge per Day		Average Length of Stay in Hospital
		Hospital	SNF	Hospital	SNF	
Rhode Island						
1982	$1195	313	26	$379	$75	12.3
1981	1115	312	29	326	67	12.5
1980	940	312	33	286	59	12.2
1979	808	307	36	257	58	11.6
1978	693	299	45	234	57	11.9
United States						
1982	$1222	388	20	$419	$92	10.2
1981	1060	378	20	351	81	10.5
1980	893	371	20	296	71	10.7
1979	751	355	20	256	64	10.7
1978	664	352	21	226	57	10.8

SOURCE: Health Care Financing Administration, 1984, *Medicare Program Statistics Selected State Data, 1978-82.*

TABLE 21. Nonfederal Hospital Expenditures per Capita, Rhode Island and United States, 1980-1985

	1980	1981	1982	1983	1984	1985
Rhode Island	$457	$509	$555	$619	$665	$716
United States	411	476	537	578	609	644

SOURCE: Health Care *Financing Administration*, 1987, unpublished data; U.S. Bureau of the Census, 1988, Current Population Reports, Series P-25, No. 1024, *State Population and Household Estimates, With Age, Sex, and Components of Change: 1981-87*.

TABLE 22. Percentage Distribution of Personal Health Care Expenditures by Service, Rhode Island and United States, 1982

State	Hospital	Physicians	Nursing Homes	Drugs & Sundries	Dentists	Other
Rhode Island	46.1	18.8	15.8	6.2	6.1	6.9
United States	47.3	21.8	9.4	7.7	6.9	6.9

SOURCE: U.S. Bureau of the Census, 1986, *State and Metropolitan Area Data Book 1986*.

TABLE 23. Personal Health Care Expenditures per Capita, Rhode Island and United States, Selected Years

	1982	1980	1976	1972	1969	1966
Rhode Island	$1351	$1062	$672	$413	$315	$231
United States	1220	958	605	381	280	201

SOURCE: NCHS, 1988, *Health United States 1987*, DHHS Pub. No. (PHS) 88-1232.